

COMMUNITY CHECKUP: WHATCOM COUNTY RESULTS

The following results show comparison scores for both commercial and Medicaid populations. These results show how Whatcom County is performing as compared to other counties and not whether the county is meeting national benchmarks. Please visit the [Community Checkup website](#) to see full Whatcom County results.

BRIGHT SPOTS

- Whatcom County is performing well when it comes to prescribing of generic medications, exceeding the state average on seven out of ten measures.
- Whatcom County is also doing a good job appropriately screening for chlamydia and cervical and colon cancers, showing better than average results across several prevention measures.

ROOM FOR IMPROVEMENT






- Whatcom County has room for improvement when it comes to access to care, with below average results found among Medicaid enrollees insured ages 7–11 and for commercially insured adults.
- While Whatcom County's results correspond to the state average for appropriate use of care measures, there is still room for significant improvement. For example, only one-quarter of commercial enrollees with acute bronchitis were successful in avoiding the inappropriate use of antibiotics.

ABOUT THE COMMUNITY CHECKUP

The Community Checkup is the Washington Health Alliance's annual report to the public comparing the performance of medical groups and clinics for basic measures of quality care. Providers use the data to discover areas for improvement, and consumers to help choose a primary care home. The report demonstrates that everyone has room to improve.

WHATCOM COUNTY COMMUNITY CHECKUP RESULTS OVERVIEW

	COMMUNITY CHECKUP MEASURE	COMMERCIAL RESULTS	MEDICAID RESULTS
ACCESS TO CARE	Child and adolescent access to primary care – ages 12–24 months	■ AVERAGE	■ AVERAGE
	Child and adolescent access to primary care – ages 2–6 years	■ AVERAGE	■ AVERAGE
	Child and adolescent access to primary care – ages 7–11 years	■ AVERAGE	▼ LOWER THAN AVERAGE
	Child and adolescent access to primary care – ages 12–19 years	■ AVERAGE	■ AVERAGE
	Adult access to preventive/ambulatory care – ages 20–44	▼ LOWER THAN AVERAGE	● BETTER THAN AVERAGE
	Adult access to preventive/ambulatory care – ages 45–64	▼ LOWER THAN AVERAGE	■ AVERAGE
	Adult access to preventive/ambulatory care - ages 65+	▼ LOWER THAN AVERAGE	*

	COMMUNITY CHECKUP MEASURE	COMMERCIAL RESULTS	MEDICAID RESULTS
APPROPRIATE USE OF CARE	Avoidance of antibiotic treatment in adults with acute bronchitis	 AVERAGE	*
	Avoidance of antibiotics for common cold	 AVERAGE	 AVERAGE
	Avoidance of x-ray, MRI and CT scan for low back pain	 AVERAGE	 AVERAGE
PRESCRIBING GENERIC PRESCRIPTIONS	Antacids (proton pump inhibitors)	 BETTER THAN AVERAGE	 AVERAGE
	Antidepressants	 BETTER THAN AVERAGE	 AVERAGE
	Attention Deficit Hyperactivity Disorder	 BETTER THAN AVERAGE	 BETTER THAN AVERAGE
	Cholesterol-lowering (statins)	 BETTER THAN AVERAGE	 AVERAGE
	High blood pressure (antihypertensives)	 BETTER THAN AVERAGE	 BETTER THAN AVERAGE
PREVENTION HEALTH SCREENINGS	Adolescent well-care visits	 AVERAGE	 AVERAGE
	Screening for breast cancer (ages 52-69)	 AVERAGE	 AVERAGE
	Screening for cervical cancer	 BETTER THAN AVERAGE	 BETTER THAN AVERAGE
	Screening for chlamydia	 AVERAGE	 BETTER THAN AVERAGE
	Screening for colon cancer	 BETTER THAN AVERAGE	 AVERAGE
CHRONIC HEALTH CONDITIONS	Asthma - use of appropriate medication	 AVERAGE	 AVERAGE
	COPD - use of spirometry in assessment and diagnosis	*	*
	Depression – antidepressant medication (12 weeks)	 AVERAGE	*
	Depression – antidepressant medication (6 months)	 AVERAGE	*
	Diabetes – blood sugar (HBA1c) test	 LOWER THAN AVERAGE	 AVERAGE
	Diabetes – cholesterol test (LDL-c or “bad” cholesterol)	 AVERAGE	 AVERAGE
	Diabetes – eye exam	 AVERAGE	 AVERAGE
	Diabetes – kidney disease screening	 AVERAGE	 AVERAGE
	Heart disease – use of beta blockers	*	*
	Heart disease – cholesterol test (LDL-c or “bad” cholesterol)	 AVERAGE	*
	Heart disease – cholesterol-lowering medication	 AVERAGE	*

* There were too few patients (fewer than 160) with the condition of interest to meaningfully report on this measure.

Note: The results are based on claims data with dates of service between January 1, 2004 and June 30, 2013 and the measurement year of July 1, 2012 – June 30, 2013.